

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

DEMOCRATIC PARTY OF ILLINOIS

ADDRESS (number and street)

P.O. BOX 518

☐Check if different  
than previously  
reported. (ACC)

SPRINGFIELD

IL

62705

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00167015

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☒

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE-Election**  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post -Election**  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

01

01

2011

through

01

31

2011

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Michael Kasper

Signature of Treasurer

Electronically Filed by Michael Kasper

Date

05

28

2011

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
DEMOCRATIC PARTY OF ILLINOIS

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2011	354610.34
(b) Cash on Hand at Beginning of Reporting Period .....	354610.34	
(c) Total Receipts (from Line 19) .....	93385.12	93385.12
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	447995.46	447995.46
7. Total Disbursements (from Line 31) .....	47144.57	47144.57
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	400850.89	400850.89
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

DEMOCRATIC PARTY OF ILLINOIS

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	1	1

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	0.00	0.00
(ii) Unitemized .....	150.00	150.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	150.00	150.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	150.00	150.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	93235.12	93235.12
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	93235.12	93235.12
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	93385.12	93385.12
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	150.00	150.00

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	5191.06	5191.06	
(ii) Non-Federal Share.....	13348.51	13348.51	
(b) Other Federal Operating Expenditures.....	0.00	0.00	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	18539.57	18539.57	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00	
24. Independent Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	7600.00	7600.00	
(b) Political Party Committees .....	0.00	0.00	
(c) Other Political Committees (such as PACs) .....	21005.00	21005.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	28605.00	28605.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	47144.57	47144.57	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	33796.06	33796.06	

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	150.00	150.00
34. Total Contribution Refunds (from Line 28(d)) .....	28605.00	28605.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	-28455.00	-28455.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	5191.06	5191.06
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	5191.06	5191.06

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 / 20

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

A.

Full Name (Last, First, Middle Initial)

Harle Montgomery

Mailing Address 2150 N. Lincoln Park West

City  
Chicago

State  
IL

Zip Code  
60614

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB28A.27754

Date of Disbursement

/   /

Amount of Each Disbursement this Period

7600.00

SUBTOTAL of Disbursements This Page (optional) .....

7600.00

TOTAL This Period (last page this line number only) .....

7600.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 7 / 20

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input checked="" type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
DEMOCRATIC PARTY OF ILLINOIS**A.**

Full Name (Last, First, Middle Initial)

I.B.E.W. - C.O.P.E

Mailing Address 900 Seventh Street

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Refund

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28C.27751

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	0	/	2	0	1	1

Amount of Each Disbursement this Period

9605.00

**B.**

Full Name (Last, First, Middle Initial)

Ironworkers Political Education Fund

Mailing Address 1750 New York Avenue, N.W.

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Refund of excess contribution

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28C.27736

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	5	/	2	0	1	1

Amount of Each Disbursement this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)

UNITED FOOD &amp; COMMERCIAL WORKERS INTERNATIONAL UNION

Mailing Address 1775 K STREET NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement  
Refund

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB28C.27753

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	0	/	2	0	1	1

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional) ►

19605.00

TOTAL This Period (last page this line number only) ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input checked="" type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

A.

Full Name (Last, First, Middle Initial)

United Transportation Union PAC

Mailing Address 14600 Detroit Avenue

City  
Cleveland

State  
OH

Zip Code  
44107

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB28C.27752

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1400.00

SUBTOTAL of Disbursements This Page (optional) .....

1400.00

TOTAL This Period (last page this line number only) .....

21005.00



**METHOD OF ALLOCATION FOR:**

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Seperate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**USE ONLY ONE SECTION, A or B****A. State and Local Party Committees****Fixed Percentage (select one)**

- X   Presidential-Only Election Year (28% Federal)
- Presidential and Senate Election Year (36% Federal)
- Senate-Only Election Year (21% Federal)
- Non-Presidential and Non-Senate Election Year (15% Federal)

**B. Separate Segregated Funds and Nonconnected Committees****Flat Minimum Federal Percentage**If the committee will allocate using the flat minimum percentage of 50% federal funds, check ☐**or**

If the committee is spending more than 50% federal funds, indicate ratio below

Federal.....  %Nonfederal.....  %

This ratio applies to (check all that apply):

 Administrative ☐    Generic Voter Drive ☐    Public Communications Referencing Party Only ☐

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 10 / 20  
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

NAME OF ACCOUNT  
 DEMOCRATIC PARTY  
 OF ILLINOIS

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 0 1 / 0 6 / 2 0 1 1

TOTAL AMOUNT TRANSFERRED

28231.36

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

28231.36

Transaction ID: H3.27717

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred) .....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 11 / 20  
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

NAME OF ACCOUNT  
 DEMOCRATIC PARTY  
 OF ILLINOIS

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 0 1 / 0 6 / 2 0 1 1

TOTAL AMOUNT TRANSFERRED

65003.76

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

65003.76

Transaction ID: H3.27718

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

93235.12

TOTAL This Period (Generic Voter Drive) .....

0.00

TOTAL This Period (Exempt Activities) .....

0.00

TOTAL This Period (Direct Fundraising) .....

0.00

TOTAL This Period (Direct Candidate Support) .....

0.00

TOTAL This Period (Public Communications Referring Only to Party) .....

0.00

TOTAL This Period (Total Amount Transferred) .....

93235.12

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 12 / 20  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A. Full Name (Last, First, Middle Initial)**  
111 West Washington, LLC

Mailing Address

111 W. Washington/Lckbx 773280

 City State Zip Code  
Chicago IL 60677

 Purpose of Disbursement:  
Rent and common area maintenance
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1644.18

 Date M M / D D / Y Y Y Y  
0 1 / 0 3 / 2 0 1 1

Transaction ID: H4.27721

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
460.37		1183.81		1644.18

**B. Full Name (Last, First, Middle Initial)**  
ATT-70 W. Madison

Mailing Address

70 W. Madison

 City State Zip Code  
Chicago IL 60602

 Purpose of Disbursement:  
Telephone
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2907.04

 Date M M / D D / Y Y Y Y  
0 1 / 0 3 / 2 0 1 1

Transaction ID: H4.27722

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
353.60		909.26		1262.86

**C. Full Name (Last, First, Middle Initial)**  
Sarah Stanfill

Mailing Address

5th Street

 City State Zip Code  
Springfield IL 62705

 Purpose of Disbursement:  
Health insurance-BCBS
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3428.96

 Date M M / D D / Y Y Y Y  
0 1 / 0 3 / 2 0 1 1

Transaction ID: H4.27723

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
146.14		375.78		521.92

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
960.11		2468.85		3428.96

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 13 / 20  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A. Full Name (Last, First, Middle Initial)**  
Blue Cross Blue Shield

Mailing Address

Bill Payment Center

 City State Zip Code  
Springfield IL 61828

 Purpose of Disbursement:  
Health insurance-Sarah Stanfill
Category/  
Type
 Activity or Event Identifier:  
Administrative
**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3428.96

 Date M M / D D / Y Y Y Y  
0 1 / 0 3 / 2 0 1 1

Transaction ID: H4.27724

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

146.14

375.78

521.92

**B. Full Name (Last, First, Middle Initial)**  
PNC Bank

Mailing Address

P.O. Box 609

 City State Zip Code  
Pittsburgh PA 15230-9738

 Purpose of Disbursement:  
Service charge
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3467.96

 Date M M / D D / Y Y Y Y  
0 1 / 0 3 / 2 0 1 1

Transaction ID: H4.27750

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

10.92

28.08

39.00

**C. Full Name (Last, First, Middle Initial)**  
Clearfire Studios

Mailing Address

2412 Silvermill Court

 City State Zip Code  
Springfield IL 62704

 Purpose of Disbursement:  
3 months web hosting and site updates
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3551.71

 Date M M / D D / Y Y Y Y  
0 1 / 0 4 / 2 0 1 1

Transaction ID: H4.27725

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

23.45

60.30

83.75

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

34.37

88.38

122.75

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 14 / 20  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A. Full Name (Last, First, Middle Initial)**  
Quill Corporation

Mailing Address

P.O. Box 94081

City	State	Zip Code
Palatine	IL	60094-4081

 Purpose of Disbursement:  
Office supplies
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

3745.29

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	4	/	2	0	1	1

Transaction ID: H4.27726

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
54.20		139.38		193.58

**B. Full Name (Last, First, Middle Initial)**  
ADP

Mailing Address

209 West Jackson

City	State	Zip Code
Chicago	IL	60606

 Purpose of Disbursement:  
W2 printing and quarterly reports
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4233.59

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	7	/	2	0	1	1

Transaction ID: H4.27727

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
136.72		351.58		488.30

**C. Full Name (Last, First, Middle Initial)**  
State Employees Retirement System

Mailing Address

2101 S. Veterans Parkway

City	State	Zip Code
Springfield	IL	62794

 Purpose of Disbursement:  
Pension payment-Flynn
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

4808.76

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	0	/	2	0	1	1

Transaction ID: H4.27730

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
161.05		414.12		575.17

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
351.97		905.08		1257.05

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 15 / 20  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A. Full Name (Last, First, Middle Initial)**  
 State Employees Retirement System

Mailing Address

2101 S. Veterans Parkway

City	State	Zip Code
Springfield	IL	62794

Purpose of Disbursement:  
 Pension payment-Randazzo

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

5618.24

Date 

M	M
0	1

 / 

D	D
1	0

 / 

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.27731

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
226.65		582.83		809.48

**B. Full Name (Last, First, Middle Initial)**  
 Sarah Stanfill

Mailing Address

5th Street

City	State	Zip Code
Springfield	IL	62705

Purpose of Disbursement:  
 Payroll check

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

6907.40

Date 

M	M
0	1

 / 

D	D
1	0

 / 

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.27746

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
360.96		928.20		1289.16

**C. Full Name (Last, First, Middle Initial)**  
 Xerox Corporation

Mailing Address

P.O. Box 650361

City	State	Zip Code
Dallas	TX	75265-0361

Purpose of Disbursement:  
 Maintenance fee

Category/Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

6935.40

Date 

M	M
0	1

 / 

D	D
1	1

 / 

Y	Y	Y	Y
2	0	1	1

Transaction ID: H4.27732

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.84		20.16		28.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
595.45		1531.19		2126.64

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 16 / 20  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A. Full Name (Last, First, Middle Initial)**  
Ambruster Manufacturing Company

Mailing Address

8600 Old Route 66 South

 City State Zip Code  
Springfield IL 62707

 Purpose of Disbursement:  
Tent rental for 2011 State Fair
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

9085.40

 Date M M / D D / Y Y Y Y  
0 1 / 1 1 / 2 0 1 1

Transaction ID: H4.27733

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
602.00		1548.00		2150.00

**B. Full Name (Last, First, Middle Initial)**  
ACH ADP Tax

Mailing Address

P.O. Box 78415

 City State Zip Code  
Phoenix AZ 85062

 Purpose of Disbursement:  
Payroll taxes
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

9646.23

 Date M M / D D / Y Y Y Y  
0 1 / 1 1 / 2 0 1 1

Transaction ID: H4.27748

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
157.03		403.80		560.83

**C. Full Name (Last, First, Middle Initial)**  
CWLP

Mailing Address

300 South Seventh Street

 City State Zip Code  
Springfield IL 62757

 Purpose of Disbursement:  
Utilities
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

9670.74

 Date M M / D D / Y Y Y Y  
0 1 / 2 1 / 2 0 1 1

Transaction ID: H4.27734

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.86		17.65		24.51

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
765.89		1969.45		2735.34

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 17 / 20  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A. Full Name (Last, First, Middle Initial)**  
Lexis Nexis

Mailing Address

P.O. Box 2314

 City State Zip Code  
Carol Stream IL 60132-2314

 Purpose of Disbursement:  
Internet
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

10127.74

 Date M M / D D / Y Y Y Y  
0 1 / 2 1 / 2 0 1 1

Transaction ID: H4.27735

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
127.96		329.04		457.00

**B. Full Name (Last, First, Middle Initial)**  
ADP

Mailing Address

209 West Jackson

 City State Zip Code  
Chicago IL 60606

 Purpose of Disbursement:  
Payroll fee
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

10177.74

 Date M M / D D / Y Y Y Y  
0 1 / 2 5 / 2 0 1 1

Transaction ID: H4.27737

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.00		36.00		50.00

**C. Full Name (Last, First, Middle Initial)**  
Kenny and Kenny, P.C.

Mailing Address

115 N. Oak Park Avenue

 City State Zip Code  
Oak Park IL 60302

 Purpose of Disbursement:  
Bookkeeping services
Category/  
Type
 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

14158.99

 Date M M / D D / Y Y Y Y  
0 1 / 2 5 / 2 0 1 1

Transaction ID: H4.27738

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1114.75		2866.50		3981.25

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1256.71		3231.54		4488.25

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 18 / 20  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A. Full Name (Last, First, Middle Initial)**  
 TTI National

Mailing Address

P.O. Box 96003

City State Zip Code  
 Charlotte NC 28296-0003

Purpose of Disbursement:  
 Telephone

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

14182.82

Date  M  M /  D  D /  Y  Y  Y  Y  
 01 / 25 / 2011

Transaction ID: H4.27740

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.67		17.16		23.83

**B. Full Name (Last, First, Middle Initial)**  
 Quill Corporation

Mailing Address

P.O. Box 94081

City State Zip Code  
 Palatine IL 60094-4081

Purpose of Disbursement:  
 Office supplies

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

14422.28

Date  M  M /  D  D /  Y  Y  Y  Y  
 01 / 25 / 2011

Transaction ID: H4.27741

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
67.05		172.41		239.46

**C. Full Name (Last, First, Middle Initial)**  
 Comcast Cable

Mailing Address

P.O. Box 3001

City State Zip Code  
 Southeastern PA 19398

Purpose of Disbursement:  
 Cable and internet

Category/  
Type

Activity or Event Identifier:  
 Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

14557.40

Date  M  M /  D  D /  Y  Y  Y  Y  
 01 / 25 / 2011

Transaction ID: H4.27742

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.83		97.29		135.12

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
111.55		286.86		398.41

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 19 / 20  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A. Full Name (Last, First, Middle Initial)**  
Sarah Stanfill

 Mailing Address  
5th Street

 City State Zip Code  
Springfield IL 62705

 Purpose of Disbursement:  
Payroll check

 Category/  
Type

 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

15846.56

 Date M M / D D / Y Y Y Y  
0 1 / 2 5 / 2 0 1 1

Transaction ID: H4.27747

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

360.96

928.20

1289.16

**B. Full Name (Last, First, Middle Initial)**  
ACH ADP Tax

 Mailing Address  
P.O. Box 78415

 City State Zip Code  
Phoenix AZ 85062

 Purpose of Disbursement:  
Payroll taxes

 Category/  
Type

 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

16407.38

 Date M M / D D / Y Y Y Y  
0 1 / 2 6 / 2 0 1 1

Transaction ID: H4.27749

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

157.03

403.79

560.82

**C. Full Name (Last, First, Middle Initial)**  
111 West Washington, LLC

 Mailing Address  
111 W. Washington/Lckbx 773280

 City State Zip Code  
Chicago IL 60677

 Purpose of Disbursement:  
Rent and Common area maintenance

 Category/  
Type

 Activity or Event Identifier:  
Administrative

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

18017.65

 Date M M / D D / Y Y Y Y  
0 1 / 2 7 / 2 0 1 1

Transaction ID: H4.27743

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

450.88

1159.39

1610.27

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

968.87

2491.38

3460.25

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 20 / 20  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

DEMOCRATIC PARTY OF ILLINOIS

**A. Full Name (Last, First, Middle Initial)**

Sarah Stanfill

Mailing Address

5th Street

City	State	Zip Code
Springfield	IL	62705

Purpose of Disbursement:	Category/Type
Health insurance reimb-BCBS	

Activity or Event Identifier:
Administrative

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

18539.57

Date	M M / D D / Y Y Y Y
	0 1 / 3 1 / 2 0 1 1

Transaction ID: H4.27744

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
146.14		375.78		521.92

**B. Full Name (Last, First, Middle Initial)**

Blue Cross Blue Shield

Mailing Address

Bill Payment Center

City	State	Zip Code
Springfield	IL	61828

Purpose of Disbursement:	Category/Type
Health insurance reimb-Sarah Stanfill	

Activity or Event Identifier:
Administrative

**[MEMO ITEM]**

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

18539.57

Date	M M / D D / Y Y Y Y
	0 1 / 3 1 / 2 0 1 1

Transaction ID: H4.27745

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
146.14		375.78		521.92

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
146.14		375.78		521.92

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
5191.06	13348.51	18539.57